



DES MOINES SYMPHONY
ACADEMY

BEGINNING STRINGS PROGRAM REGISTRATION FORM

Student Name:	Birthday:	Dates: June 3, 2018 – August 17, 2018	Registration Deadline – May 10
STUDENT INFORMATION			
Experience Level: (Example: One BSP Session)		School:	Grade: Age:
Tuition: \$160.00		Specific weeks are as follows: June 4-8, June 11-15, June 18-22, June 25-29, July 16-20, July 23-27, July 30 – Aug 3, Aug 6-10, Aug 13-17	
Class: Includes nine (9) weekly classes per semester		Length of Class: 45 Minutes once per week	
Location of BSP Class: Temple for Performing Arts			
Preferred Instrument: Cello <input type="checkbox"/> Violin <input type="checkbox"/> Either <input type="checkbox"/>			
<u>Violin Class – Monday & Tuesday</u>		<u>Violin Class – Saturday (only)</u>	
Monday: 9:30 <input type="checkbox"/> 10:45 <input type="checkbox"/> 11:00 <input type="checkbox"/> 12:00 <input type="checkbox"/> 1:30 <input type="checkbox"/>		Friday: <i>no classes</i>	
Tuesday: 9:00 <input type="checkbox"/> 9:30 <input type="checkbox"/> 9:45 <input type="checkbox"/> 10:15 <input type="checkbox"/> 10:30 <input type="checkbox"/> 11:30 <input type="checkbox"/> 1:30 <input type="checkbox"/> 4:15 <input type="checkbox"/>		Saturday: 10:00 <input type="checkbox"/> 10:45 <input type="checkbox"/>	
<u>Violin Class – Wednesday & Thursday</u>		<u>Cello Class – Monday & Thursday</u>	
Wednesday: 10:00 <input type="checkbox"/> 11:45 <input type="checkbox"/> 12:00 <input type="checkbox"/> 12:45 <input type="checkbox"/>		Monday: 2:30 <input type="checkbox"/> 3:15 <input type="checkbox"/> 4:00 <input type="checkbox"/> 4:45 <input type="checkbox"/>	
Thursday: 9:30 <input type="checkbox"/> 10:15 <input type="checkbox"/> 11:30 <input type="checkbox"/> 1:30 <input type="checkbox"/> 4:15 <input type="checkbox"/>		Thursday: 2:30 <input type="checkbox"/> 3:15 <input type="checkbox"/>	
Please indicate <u>as many lesson times as possible</u> that will work for your family, this will allow us to build the perfect class for your child.			
BILLING & CONTACT INFORMATION			
Parent/Guardian:	Parent/Guardian:	Address:	Primary & Secondary phone no.:
Employer:	Primary Email:	Secondary Email:	
Payment: Check <input type="checkbox"/> Cash <input type="checkbox"/> Credit Card <input type="checkbox"/> VISA MASTER CARD DISCOVER AMERICAN EXPRESS			
Credit Card No. _____ Expiration Date: _____ CCV: _____			
A parent/guardian must pick up their student directly from the teacher.	Have you read our Lesson Policies, Terms, and Agreements?	May we use your child’s video or photographs for promotional use on social media and other platforms?	Parents/Guardians are not required to be in the lesson during class time. However, we highly recommend it!
If someone other than a parent is picking the child up it must be submitted in writing before the beginning of that class. Initial _____	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Please be sure to be at your child’s lesson 10 minutes before it ends to gather your child on time. Initial _____
Payment amount: Tuition _____ + \$7 Violin Sponge Yes <input type="checkbox"/> No <input type="checkbox"/> Final balance due and/or to be charged: _____			
<u>Rental Information:</u> Becker Fine Stringed Instruments (515)274-9420 6567 University Ave Windsor Heights, IA 50324 Hours: Tuesday – Friday 10:00-5:30, Saturday 10:00-3:00		<u>Registration Submission Information:</u> Return to Amanda Drish - Manager of Beginning Strings Email: amanda@dmsymphony.org Mail or Deliver: 1011 Locust Street Suite 200, Des Moines, IA 50309 Hours: Monday – Friday 9:00-5:00	
IN CASE OF EMERGENCY			
Name of local friend or relative (not living at same address):	Relationship to student:	Cell phone no.:	Work phone no.:
I authorize my payment be paid and/or charged in full directly to the Des Moines Symphony Academy before the start of classes. I understand that I am financially responsible for any balance due; I have read the Lesson Policies, Terms & Agreements form and understand cancelation and makeup policies.			
_____ Parent/Guardian signature		_____ Date	